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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Jeffrey First name A. Middle name Ockerlund Last name and Suffix (Sr., Jr., II, III)	Diane First name T. Middle name Ockerlund Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7402	xxx-xx-4126

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Debtor 1 Jeffrey A. Ockerlund
Debtor 2 Diane T. Ockerlund

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)
	EINs	EINs
Where you live	4560 Barharbor Drive	If Debtor 2 lives at a different address:
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. □ I have another reason. Explain. (See 28 U.S.C. § 1408.)
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) EINs Where you live 4560 Barharbor Drive Lake in the Hills, IL 60156 Number, Street, City, State & ZIP Code McHenry County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.

Case 18-81022 Doc 1 Filed 05/08/18 Entered 05/08/18 13:19:19 Desc Main Page 3 of 50 Document Jeffrey A. Ockerlund Debtor 1 Debtor 2 Diane T. Ockerlund Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. When Case number District District When Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you

11. Do you rent your residence?

■ No. Go to line 12.

District

☐ Yes. Has your landlord obtained an eviction judgment against you?

☐ No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Case number, if known

When

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Deb	otor 2 Diane T. Ockerlun	ıd		Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Own as a Sole Propri	etor
			104 0 W 1 40 4 00 10 1 10 p 1 1	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bu	usiness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, St	ate & ZIP Code
	it to this petition.		Check the appropriate b	ox to describe your business:
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))
			☐ Commodity Brok	ter (as defined in 11 U.S.C. § 101(6))
			☐ None of the about	ve
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you indicate that you are	e court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Cha	apter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Don	Demont if You Own or	Have Am	. Hamandarra Buan antir an A	December That Needs Issuedicts Attacking
Par	•		Hazardous Property or A	ny Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	No.		
	alleged to pose a threat	☐ Yes.	Mile of the decrease 10	
	of imminent and identifiable hazard to public health or safety?		What is the hazard?	
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

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Debtor 1 **Jeffrey A. Ockerlund**Debtor 2 **Diane T. Ockerlund**

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

] Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-81022 Doc 1 Filed 05/08/18 Entered 05/08/18 13:19:19 Desc Main Document Page 6 of 50

Jeffrey A. Ockerlund Debtor 1 Debtor 2 Diane T. Ockerlund Case number (if known) **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10.000.000.001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jeffrey A. Ockerlund /s/ Diane T. Ockerlund Jeffrey A. Ockerlund Diane T. Ockerlund Signature of Debtor 1 Signature of Debtor 2 Executed on May 8, 2018 Executed on May 8, 2018 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Jeffrey A. Ockerlund
Debtor 2 Diane T. Ockerlund

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Scott A. Bentley	Date	May 8, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Scott A. Bentley		
Printed name		
Law Office of Scott A. Bentley		
Firm name		
5435 Bull Valley Road Suite 318		
McHenry, IL 60050		
Number, Street, City, State & ZIP Code		
Contact phone 815-385-0669	Email address	scottbentleylaw@gmail.com
6191377 IL		
Bar number & State		

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		DOCUM	<u>ani Pade 8 di 50</u>	
Fill in this infor	mation to identify your	case:		
Debtor 1	Jeffrey A. Ockerl	und		
	First Name	Middle Name	Last Name	
Debtor 2	Diane T. Ockerlui	nd		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	
		value	of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	200,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	146,435.93
	1c. Copy line 63, Total of all property on Schedule A/B	\$	346,435.93
Pai	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	257,701.62
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	22,042.13
	Your total liabilities	\$	279,743.75
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,026.90
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,528.39
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1	Jeffrey A. Ockerlund
Debtor 2	Diane T. Ockerlund

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,559.25

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clain	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill	in this inform	ation to identify	your case and	this filing:			
Deb	otor 1	Jeffrey A. O					
	otor 2 use, if filing)	First Name Diane T. Oc First Name	kerlund	dle Name	Last Name		
Unit	ed States Ban	kruptcy Court to	r the: NORTHE	RN DISTRICT OF ILL	INOIS		
Cas	e number				_		☐ Check if this is an amended filing
n eachink	ch category, se it fits best. Be	as complete and space is needed,	roperty describe items. Lis accurate as possil	ble. If two married peop	an asset fits in more than one le are filing together, both are he top of any additional pages	equally responsible fo	r supplying correct
Part	1: Describe E	ach Residence, E	Building, Land, or C	Other Real Estate You O	own or Have an Interest In		
•	No. Go to Part 2						
1.1	4560 Barba Street address, if	arbor Drive available, or other de	scription	Single-family Duplex or mu	ty? Check all that apply / home ulti-unit building m or cooperative	the amount of any sec	d claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property.
	Lake in the	Hills IL State	60156-0000 ZIP Code	☐ Manufacture ☐ Land ☐ Investment p	d or mobile home	Current value of the entire property? \$200,000.0	portion you own?
				☐ Timeshare ☐ Other ☐ Who has an interes ☐ Debtor 1 only	st in the property? Check one		of your ownership interest tenancy by the entireties, or vn.
	McHenry			Debtor 2 only	-		
	County				d Debtor 2 only of the debtors and another	Check if this is (see instructions)	community property
				Other information property identification	you wish to add about this ite tion number:	m, such as local	
					from Part 1, including any		\$200,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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		iane T. Ockerlund	Ca	ase number (if known)	
_	s, vans,	trucks, tractors, sport	utility vehicles, motorcycles		
\square N	lo				
■ Y	es				
	Make:	Honda Civic	Who has an interest in the property? Check one	the amount of any secur	claims or exemptions. Put ed claims on Schedule D:
	Model: Year:	2010	Debtor 1 only Debtor 2 only	Creditors Who Have Cla	ims Secured by Property.
		nate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	• •	formation:	☐ At least one of the debtors and another	chare property:	portion you own.
			_	¢2 000 00	\$2,000.0
			Check if this is community property (see instructions)	\$3,000.00	\$3,000.00
3.2	Make: Model:	Pontiac Vibe	Who has an interest in the property? Check one	the amount of any secur	claims or exemptions. Put ed claims on Schedule D: nims Secured by Property.
	Year:	2003	Debtor 2 only	Current value of the	Current value of the
	Approxin	nate mileage:	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
г	Other inf	formation:	At least one of the debtors and another		
			Check if this is community property (see instructions)	\$1,000.00	\$1,000.00
	Make: Model: Year:	Dodge Caravan 2014	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only	the amount of any secur Creditors Who Have Cla	claims or exemptions. Put ed claims on Schedule D: nims Secured by Property.
	Approxin	nate mileage:	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		ormation:	☐ At least one of the debtors and another	,	
			Check if this is community property (see instructions)	\$9,000.00	\$9,000.00
			(see instructions)		
	<i>mples:</i> B lo		ATVs and other recreational vehicles, other vehicles, and sonal watercraft, fishing vessels, snowmobiles, motorcycle a		
Exar ■ N □ Y	mples: B lo es d the do	oats, trailers, motors, per		nccessories	\$13,000.00
Exar N Y Add pag	mples: B	oats, trailers, motors, per ollar value of the portior have attached for Part be Your Personal and Hou	sonal watercraft, fishing vessels, snowmobiles, motorcycle a n you own for all of your entries from Part 2, including an 2. Write that number here	nccessories	Current value of the portion you own? Do not deduct secured
■ N Adda.pag art 3: o yo Hou Exa	mples: B	oats, trailers, motors, per ollar value of the portion have attached for Part be Your Personal and Hou or have any legal or equ goods and furnishings	sonal watercraft, fishing vessels, snowmobiles, motorcycle and you own for all of your entries from Part 2, including an 2. Write that number heresehold Items itable interest in any of the following items?	nccessories	Current value of the

Official Form 106A/B Schedule A/B: Property

page 2

Case 18-81022 Doc 1 Filed 05/08/18 Entered 05/08/18 13:19:19 Desc Main Page 12 of 50 Document Jeffrey A. Ockerlund Debtor 1 Debtor 2 Diane T. Ockerlund Case number (if known) 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... Computer \$650.00 Location: 4560 Barharbor Drive, Lake in the Hills IL 60156 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles □ No Yes. Describe..... \$50.00 Books, pictures and other art objects. 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments □ No Yes. Describe..... \$800.00 Firearms, sports equipment, bicycles, cameras. 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe..... **Duty Weapons** \$200.00 Location: 4560 Barharbor Drive, Lake in the Hills IL 60156 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$100.00 Wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$3,122.50

Case 18-81022 Doc 1 Filed 05/08/18 Entered 05/08/18 13:19:19 Desc Main Document Page 13 of 50 Jeffrey A. Ockerlund Debtor 1 Diane T. Ockerlund Case number (if known) Debtor 2 Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Chase Joint Checking P.O. Box 15123 \$266.00 Account 17.1. Wilmington, DE 19850-5124 **Castle Bank** 1620 Dodge Sreet \$12.09 Savings Omaha, NE 68197 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No

Yes. List each account separately.

Type of account: Institution name:

Retirement, 401K or pension plan

Cook County Pension Fund 70 W. Madison #1925 Chicago, IL 60602

\$130,000,00

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

□ No

Institution name or individual: Yes.

> Utility ComEd \$35.34

Case 18-81022 Doc 1 Filed 05/08/18 Entered 05/08/18 13:19:19 Desc Main Page 14 of 50 Document Jeffrey A. Ockerlund Debtor 1 Diane T. Ockerlund Debtor 2 Case number (if known) 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue

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☐ Yes. Describe each claim.......

■ No

		Case 18-81022	Doc 1	Filed 05/08/18 Document	Entered 0 Page 15 of	5/08/18 13:19:19 50	Desc Main
Debt Debt		Jeffrey A. Ockerlund Diane T. Ockerlund		Boodinone	1 ago 10 oi	Case number (if known)	
			ad alaima of a	wary natura includin	a countaralaima	of the debtor and rights to	and off plaims
	No	contingent and uniquidate	eu ciaiiiis oi e	every nature, includin	g counterclaims	of the debtor and rights to	set on cialins
		Describe each claim					
25 A	ny fin	ancial assets you did not	alroady list				
	No	ancial assets you did not	alleauy list				
		Give specific information					
		•					
36.		he dollar value of all of yo art 4. Write that number he					\$130,313.43
Part :	5: Des	scribe Any Business-Related	Property You (own or Have an Interest	In. List any real esta	ate in Part 1.	
37. D	o you d	own or have any legal or equit	table interest ir	any business-related p	roperty?		
	No. Go	to Part 6.					
	Yes. G	So to line 38.					
Part (scribe Any Farm- and Comme ou own or have an interest in fa			n or Have an Intere	st In.	
46. D	o you	own or have any legal or	equitable int	erest in any farm- or o	commercial fishir	ng-related property?	
ı	No.	Go to Part 7.					
I	☐ Yes.	. Go to line 47.					
Part ?	7:	Describe All Property You C	Own or Have ar	Interest in That You Did	Not List Above		
53. D	ο νου	have other property of ar	ny kind you d	id not already list?			
		oles: Season tickets, country					
	No						
Ш	Yes.	Give specific information					
54	Δdd t	he dollar value of all of yo	ur entries fro	m Part 7 Write that n	umber here		\$0.00
0-1.	Auu t	ne donar value of all of yo	ar critico ire	mir are 7. Write that in			Ψ0.00
Part 8	8:	List the Totals of Each Part of	of this Form				
	_						
55.		: Total real estate, line 2					\$200,000.00
		2: Total vehicles, line 5	ahald itama		\$13,000.00		
		3: Total personal and hous I: Total financial assets, li		ine 15	\$3,122.50 \$130,313.43		
		5: Total hilancial assets, iii 5: Total business-related p		 45	\$130,313.43		
		6: Total farm- and fishing-r	•		\$0.00		
		7: Total other property not			\$0.00		
62	Total	norconal property Add to	oo EG through			Convinces and property	otal #440.40F.00
62.	rotal	personal property. Add lin	es so inrough		\$146,435.93	Copy personal property to	otal \$146,435.93
63.	Total	of all property on Schedu	le A/B. Add lir	ne 55 + line 62			\$346.435.93

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		17/7/4/11/15	311 11111 11111	
Fill in this infor	mation to identify your	case:		
Debtor 1	Jeffrey A. Ockerl	und		
	First Name	Middle Name	Last Name	
Debtor 2	Diane T. Ockerlui	nd		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are	you claiming	? Check one only	, even if	your spouse	is filing	g with	you.
----	-----------------------------	--------------	------------------	-----------	-------------	-----------	--------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
4560 Barbarbor Drive Lake in the Hills, IL 60156 McHenry County	\$200,000.00	•	\$30,000.00	735 ILCS 5/12-901	
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
2010 Honda Civic Line from Schedule A/B: 3.1	\$3,000.00		\$3,000.00	735 ILCS 5/12-1001(c)	
Ellie Holli Schedule A.B. 3.1			100% of fair market value, up to any applicable statutory limit		
2003 Pontiac Vibe Line from Schedule A/B: 3.2	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(c)	
Ellie Irolli Goriedale 74 B. 412			100% of fair market value, up to any applicable statutory limit		
Location: 4560 Barharbor Drive, Lake in the Hills IL 60156	\$1,322.50		\$1,322.50	735 ILCS 5/12-1001(b)	
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
Computer Location: 4560 Barharbor Drive, Lake	\$650.00		\$650.00	735 ILCS 5/12-1001(b)	
in the Hills IL 60156 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		

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Jeffrey A. Ockerlund

Diane T. Ockerlund Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Firearms, sports equipment, 735 ILCS 5/12-1001(b) \$800.00 \$800.00 bicycles, cameras. Line from Schedule A/B: 9.1 100% of fair market value, up to any applicable statutory limit **Duty Weapons** 20 ILCS 1805/10 \$200.00 \$200.00 Location: 4560 Barharbor Drive, Lake 100% of fair market value, up to in the Hills IL 60156 Line from Schedule A/B: 10.1 any applicable statutory limit Wearing apparel. 735 ILCS 5/12-1001(a) \$100.00 \$100.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Joint Checking Account: Chase 735 ILCS 5/12-1001(b) \$266.00 \$266.00 P.O. Box 15123 Wilmington, DE 19850-5124 100% of fair market value, up to Line from Schedule A/B: 17.1 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

Debtor 1

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		Document	Page 18	8 of 50		
Fill in this information	n to identify you	r case:				
	effrey A. Ocker		LastNassa			
	st Name	Middle Name	Last Name			
	ane T. Ockerlu st Name	Middle Name	Last Name			
		NODTHERN BIOTRICT OF ILL	LINIOIO			
United States Bankrup	tcy Court for the:	NORTHERN DISTRICT OF ILI	LINOIS			
Case number					_	if this is an
					ameno	led filing
Official Form 10	IED					
		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	C	al lass Danasa a sats		
Schedule D:	Creditors	Who Have Claims	Secure	a by Propert	у	12/15
		f two married people are filing togeth out, number the entries, and attach it				
1. Do any creditors have	claims secured by	your property?				
☐ No. Check this b	oox and submit th	nis form to the court with your other	r schedules. Y	ou have nothing else t	o report on this form.	
■ Yes. Fill in all of		ŕ		ŭ	·	
		Delow.				
<u> </u>	ured Claims			Column A	Column B	Column C
for each claim. If more that	an one creditor has	nore than one secured claim, list the cre a particular claim, list the other creditor cal order according to the creditor's name	rs in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 Citi Mortgage	Inc.	Describe the property that secures	the claim:	\$77,105.02	\$200,000.00	\$43,925.96
Creditor's Name		4560 Barbarbor Drive Lake				
		Hills, IL 60156 McHenry Co	unty			
P.O. Box 7900		As of the date you file, the claim is:	Check all that			
Saint Louis, M 63179-0005	O	apply.				
Number, Street, City, S	tato & Zin Codo	☐ Contingent				
Number, Street, City, S	state & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt? C	heck one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as	mortgage or se	ecured		
Debtor 2 only		car loan)				
■ Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the deb	tors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim re	elates to a	Other (including a right to offset)	Second M	ortgage		
community debt		3				
Date debt was incurred		Last 4 digits of account num	7325			
2.2 Ditech		Describe the property that secures	the claim:	\$166,820.94	\$200,000.00	\$0.00
Creditor's Name		4560 Barbarbor Drive Lake		\$100,020.94	\$200,000.00	φυ.υυ
		Hills, IL 60156 McHenry Co				
P.O. Box 6172		_	-			
Rapid City, SD)	As of the date you file, the claim is: apply.	Check all that			
57709-6172		☐ Contingent				
Number, Street, City, S	state & Zip Code	☐ Unliquidated				
		Disputed				
Who owes the debt? C	heck one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as car loan)	mortgage or se	ecured		
Debtor 2 only			oboniolo lian'			
Debtor 1 and Debtor 2		Statutory lien (such as tax lien, me	crianic's ilen)			
At least one of the deb		☐ Judgment lien from a lawsuit	Eiret Mart	aaaa		
Check if this claim re community debt	elates to a	Other (including a right to offset)	First Mort	yay e		
Date debt was incurred		Last 4 digits of account num	ber 4906			

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Debtor 1	Jeffrey A. Ockerlund			Case number (if know)		
	First Name Middle	Name Last Name	_			
Debtor 2	Diane T. Ockerlund					
	First Name Middle	e Name Last Name				
2.3 Hu ı	ntington Bank	Describe the property that secures	s the claim:	\$13,775.66	\$9,000.00	\$4,775.66
Credi	itor's Name	2014 Dodge Caravan				
). Box 182519 lumbus, OH 43218	As of the date you file, the claim is apply. Contingent	S: Check all that			
Numb	ber, Street, City, State & Zip Code	☐ Unliquidated				
Who owe	es the debt? Check one.	☐ Disputed Nature of lien. Check all that apply	<u>'</u> .			
☐ Debtor☐ Debtor	•	An agreement you made (such a car loan)	s mortgage or s	secured		
Debtor	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, m	echanic's lien)			
☐ At least	t one of the debtors and anothe	r ☐ Judgment lien from a lawsuit				
	if this claim relates to a nunity debt	Other (including a right to offset)	Car Loan			
Date debt	was incurred	Last 4 digits of account nur	mber <u>1383</u>	<u> </u>		
Add the	dollar value of your entries in	Column A on this page. Write that nu	mber here:	\$257,701.6	2	
	the last page of your form, ac at number here:	dd the dollar value totals from all page	s.	\$257,701.6	2	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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00	300 10 01022	Document Page 2	n of 50	oo wan
Fill in this infor	mation to identify your case:			
Debtor 1	Jeffrey A. Ockerlund			
		le Name Last Name		
Debtor 2	Diane T. Ockerlund			
(Spouse if, filing)	First Name Midd	le Name Last Name		
United States Ba	ankruptcy Court for the: NORTHE	ERN DISTRICT OF ILLINOIS		
Case number				
(if known)			_	Check if this is an
				amended filing
Official Forr	n 106F/F			
	F/F: Creditors Who Hav	e Unsecured Claims		12/15
			Part 2 for creditors with NONPRIORITY cla	
Schedule D: Credit left. Attach the Cor name and case nu	tors Who Have Claims Secured by Pro ntinuation Page to this page. If you ha mber (if known).	perty. If more space is needed, copy we no information to report in a Part,	any creditors with partially secured claim the Part you need, fill it out, number the e do not file that Part. On the top of any add	ntries in the boxes on the
	II of Your PRIORITY Unsecured C			
	ors have priority unsecured claims ag	anist you?		
No. Go to F	Part 2.			
Yes.	II of Vour NONDRIORITY Uncome	and Claims		
	II of Your NONPRIORITY Unsecu			
	ors have nonpriority unsecured claims			
☐ No. You ha	ive nothing to report in this part. Submit the	his form to the court with your other sche	edules.	
Yes.				
unsecured clai	m, list the creditor separately for each cla	aim. For each claim listed, identify what t	b holds each claim. If a creditor has more the type of claim it is. Do not list claims already in three nonpriority unsecured claims fill out the	cluded in Part 1. If more
				Total claim
4.1 Capital	One	Last 4 digits of account number	6216	\$5,317.33
•	y Creditor's Name	-		
P.O. Bo	ox 6492 Stream, IL 60197	When was the debt incurred?		_
	Street City State ZIp Code	As of the date you file, the claim	s: Check all that apply	
Who incu	rred the debt? Check one.		,	
■ Debto	r 1 only	☐ Contingent		
☐ Debto	r 2 only	☐ Unliquidated		
☐ Debto	r 1 and Debtor 2 only	☐ Disputed		
☐ At leas	st one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check	c if this claim is for a community	☐ Student loans		
debt	-		aration agreement or divorce that you did not	
_	im subject to offset?	report as priority claims		
■ No		Debts to pension or profit-sharing		
☐ Yes		Other. Specify Credit card	purchases	_

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Debtor 2 Diane T. Ockerlund Case number (if know) 4.2 \$909.03 **Capital One** Last 4 digits of account number 5499 Nonpriority Creditor's Name P.O. Box 6492 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card purchases ☐ Yes 4.3 **Capital One** Last 4 digits of account number 3665 \$933.23 Nonpriority Creditor's Name P.O. Box 6492 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes \$4,682.08 4.4 **Capital One** Last 4 digits of account number 8775 Nonpriority Creditor's Name P.O. Box 6492 When was the debt incurred? Carol Stream, IL 60197 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card purchases ☐ Yes

Debtor 1 Jeffrey A. Ockerlund

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	1 Jeffrey A. Ockerlund 2 Diane T. Ockerlund	Case number (if know)	
4.5	Centegra Health System	Last 4 digits of account number 1811	\$489.51
	Nonpriority Creditor's Name P.O. Box 6204 Carol Stream, IL 60197-6204	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Services	
4.6	Central Credit Services Nonpriority Creditor's Name	Last 4 digits of account number	\$4,271.10
	P.O. Box 357 Ramsey, NJ 07446	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	
4.7	Comenity -Lenovo Preferred Card Nonpriority Creditor's Name	Last 4 digits of account number 5794	\$680.09
	P.O. Box 659707	When was the debt incurred?	
	San Antonio, TX 78265-9707	As of the date were file the plainties Of the Hull to the	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify Laptop Computer	

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	1 Jeffrey A. Ockerlund 2 Diane T. Ockerlund	Case number (if know)	
4.8	Mayo Clinic Rochester	Last 4 digits of account number 5509	\$222.07
	Nonpriority Creditor's Name 200 First Street SW Rochester, MN 55905-0001	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Services	
4.9	Metro Center for Health Nonpriority Creditor's Name	Last 4 digits of account number 1830	\$315.10
	901 McClintok Drive Ste 202 Burr Ridge, IL 60527	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Hospital Stay	
44			
4.1 0	Northwest Neurology Ltd. Nonpriority Creditor's Name	Last 4 digits of account number 7421	\$359.42
	P.O. Box 71831 Chicago, IL 60694-1831	When was the debt incurred?	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	Other. Specify Doctor Visits	
	— 100	Timer. Specify	

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Debtor Debtor	1 Jeffrey A. Ockerlund 2 Diane T. Ockerlund	Case number (if know)	
4.1 1	NW Oral & Maxilofacial Surgery	Last 4 digits of account number 9613	\$570.80
	Nonpriority Creditor's Name 2445 Westfield Drive St. 502	When was the debt incurred?	
	Elgin, IL 60124 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Dentistry	
4.1	Optimum Outcomes	Last 4 digits of account number 1369	\$489.51
	Nonpriority Creditor's Name P.O. BOx 660943 Dallas, TX 75266	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Services	
4.1	Synchrony Bank-Discount Tires	Last 4 digits of account number 4254	\$516.45
	Nonpriority Creditor's Name P.O. Box 960061 Orlando, FL 32896-0061	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Tires	

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Debtor 2 Diane T. Ockerlund Case number (if know) 4.1 0001 Synchrony Bank-JCP \$1.597.11 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 960090 When was the debt incurred? Orlando, FL 32896-0090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit card purchases 4.1 Synchrony Bank-JCP \$689.30 2811 Last 4 digits of account number 5 Nonpriority Creditor's Name P.O. Box 960090 When was the debt incurred? Orlando, FL 32896-0090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? American Express Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Box 0001 Part 2: Creditors with Nonpriority Unsecured Claims Los Angeles, CA 90096-8000 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Centegra Health System Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 6204 Part 2: Creditors with Nonpriority Unsecured Claims Carol Stream, IL 60197-6204 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Professional Service Bureau** Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 911 Lund Blvd. Suite 100 ■ Part 2: Creditors with Nonpriority Unsecured Claims Anoka, MN 55303-0548 Last 4 digits of account number 9660

Part 4: Add the Amounts for Each Type of Unsecured Claim

Debtor 1 Jeffrey A. Ockerlund

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Debtor 1 **Jeffrey A. Ockerlund**Debtor 2 **Diane T. Ockerlund**

Case number (if know)

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
6a.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim
6f.	Student loans	6f.	\$	0.00
6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	22,042.13
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	22,042.13
	6b. 6c. 6d. 6e. 6f. 6g. 6h. 6i.	 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6d. 6d. 6d. 6d. 6d. 6d. 6d. 6e.	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$ 6c. \$ 6d. \$

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		I A A A HI III	111 1 1111. 7 7 (11 . 1/1	
Fill in this infor	mation to identify your	case:		
Debtor 1	Jeffrey A. Ockerl	und		
	First Name	Middle Name	Last Name	
Debtor 2	Diane T. Ockerlui	nd		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(ii iaieiii)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	Oity		Otato	Zii Oodc	
2.0	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	,				
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5	City		Oldio	Zii Oodo	
	Name				
	Number	Street			_
	City		State	ZIP Code	_

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		DUGUIIIE	ui Pauezot	1.50	
Fill in this in	formation to identify your				
Debtor 1	Jeffrey A. Ockerli	und			
	First Name	Middle Name	Last Name		
Debtor 2	Diane T. Ockerlur				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numbe	r			☐ Check	if this is an
				amend	ed filing
Official I	Form 106H				
Schedu	le H: Your Cod	ebtors			12/15
1. Do yo No Yes 2. Withir Arizona, No. G Yes. [California, Idaho, Louisiana, o to line 3. Did your spouse, former spounn 1, list all of your codebt again as a codebtor only i	you are filing a joint case, I lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your f that person is a guaran	operty state or territor erto Rico, Texas, Washi with you at the time?	y? (Community property states and territor	ne person shown nedule D (Official
out Colu		Form 100E/F), or Scheu	ule G (Official Form 10	Column 2: The creditor to whom yo	
	ne, Number, Street, City, State and ZI	P Code		Check all schedules that apply:	
3.1				☐ Schedule D, line	
Na	me			Schedule E/F, line	
				☐ Schedule G, line	
Nu	mber Street			_	
Cit	y	State	ZIP Code		
3.2				☐ Schedule D, line	
Na	me			☐ Schedule E/F, line	
				Schedule G, line	
Nu	mber Street			_	
City		State	ZIP Code		

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Fill	in this information to i	identify your c	ase:		
Del	otor 1	Jeffrey A. O	ckerlund		
1	otor 2	Diane T. Oc	kerlund		
Uni	ted States Bankruptc	y Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS	
	se number			-	Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:
0	fficial Form 1	106I			MM / DD/ YYYY
S	chedule I: Y	our Inc	ome		12/1
sup spo	plying correct infornuse. If you are separ	mation. If you rated and yoບ	are married and not filing wi	ng jointly, and your spouse is li ith you, do not include informat	and Debtor 2), both are equally responsible for ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question
sup spo atta	plying correct informuse. If you are separch a separate sheet tt: Describe I Fill in your employ	mation. If you rated and you to this form.	are married and not filing wi	ng jointly, and your spouse is li ith you, do not include informat ional pages, write your name an	ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question
sup spo atta Pa	plying correct informuse. If you are separch a separate sheet The separate sheet The separate sheet Describe I Fill in your employ information.	mation. If you rated and you to this form. Employment	are married and not filing wi	ng jointly, and your spouse is li ith you, do not include informat ional pages, write your name an Debtor 1	ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filing spouse
sup spo atta Pa	plying correct informuse. If you are separate sheet t1: Describe I Fill in your employ information. If you have more the attach a separate points.	mation. If you rated and you to this form. Employment yment an one job, age with	are married and not filing wi	ng jointly, and your spouse is lith you, do not include informational pages, write your name an Debtor 1 Employed	ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filing spouse
sup spo atta Pa	plying correct informuse. If you are separch a separate sheet T1: Describe I Fill in your employ information. If you have more the	mation. If you rated and you to this form. Employment yment an one job, age with	are married and not fili ir spouse is not filing w On the top of any additi	ng jointly, and your spouse is li ith you, do not include informat ional pages, write your name an Debtor 1	ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filing spouse
sup spo atta Pa	plying correct informuse. If you are separate sheet t1: Describe I Fill in your employ information. If you have more the attach a separate poinformation about according to the separate poinformation according to the separate sheet.	mation. If you rated and you to this form. Employment yment an one job, age with dditional easonal, or	are married and not filing wing spouse is not filing wing the top of any addition the top of any additional top of additio	ng jointly, and your spouse is liith you, do not include informational pages, write your name an Debtor 1 Employed Not employed	ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filing spouse Employed Not employed
sup spo atta Pa	plying correct informuse. If you are separate sheet It 1: Describe I Fill in your employ information. If you have more the attach a separate prinformation about a employers. Include part-time, se	mation. If you rated and you to this form. Employment whent an one job, age with dditional easonal, or clude student	are married and not filing with the spouse is not filing with the stop of any addition the stop of the stop o	ng jointly, and your spouse is liith you, do not include informational pages, write your name an Debtor 1 Employed Not employed Deputy Sheriff	ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filing spouse Employed Not employed
sup spo atta Pa	plying correct informuse. If you are separch a separate sheet Fill in your employ information. If you have more thattach a separate prinformation about a employers. Include part-time, so self-employed work Occupation may income.	mation. If you rated and you to this form. Employment whent an one job, age with dditional easonal, or clude student	are married and not filing with the spouse is not filing with the stop of any additional status. Employment status. Occupation. Employer's name.	Debtor 1 Employed Deputy Sheriff Cook County Government 118 North Clark Street Chicago, IL 60602	ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filing spouse Employed Not employed
sup spo atta Pa	plying correct informuse. If you are separch a separate sheet The separate sheet The separate sheet The separate sheet Fill in your employ information. If you have more the attach a separate painformation about a employers. Include part-time, so self-employed work Occupation may income or homemaker, if it is	mation. If you rated and you to this form. Employment whent an one job, age with dditional easonal, or clude student	are married and not filing with the spouse is not filing with the spouse status. Coccupation Employer's name Employer's address How long employed to	Debtor 1 Employed Deputy Sheriff Cook County Government 118 North Clark Street Chicago, IL 60602	ving with you, include information about your ion about your spouse. If more space is needed, d case number (if known). Answer every question Debtor 2 or non-filing spouse Employed Not employed

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

			non-ı	illing spouse
2.	\$	7,559.25	\$	0.00
3.	+\$ _	0.00	+\$_	0.00
4.	\$	7,559.25	\$_	0.00

For Debtor 2 or

For Debtor 1

Official Form 106I Schedule I: Your Income page 1

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	tor 1 tor 2	Jeffrey A. Ockerlund Diane T. Ockerlund	_	,	Case	number (if kr	nown)				
					For	Debtor 1			For Debto		
	Сор	y line 4 here	4.		\$_	7,559	9.25	_		0.0	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ā.	\$	2,532	2.35	\$;	0.0	0
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	- 1		0.0	
	5c.	Voluntary contributions for retirement plans	50	.	\$_	(0.00	- \$,	0.0	0
	5d.	Required repayments of retirement fund loans	50	d.	\$	(0.00	- \$,	0.0	0
	5e.	Insurance	5€	€.	\$	(0.00	\$,	0.0	0
	5f.	Domestic support obligations	5f		\$_	(0.00	\$;	0.0	0
	5g.	Union dues	50	g.	\$		0.00	\$		0.0	0
	5h.	Other deductions. Specify:	5h	1.+	\$_	(0.00	_ + \$	<i>.</i>	0.0	0_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	2,532	2.35	\$	·	0.0	0_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	5,026	6.90	\$	<u> </u>	0.0	0_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	0.0		\$			ď		0.0	•
	8b.	Interest and dividends	8a 8b		» \$		0.00 0.00			0.0	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$_ \$		0.00	- ¥		0.0	_
	8d.	Unemployment compensation	80		\$		0.00	_ `		0.0	
	8e.	Social Security	86		\$_		0.00		;	0.0	
	8f. 8g. 8h.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8f		\$_ \$_ \$_	().00).00	_ \$	S	0.00	<u>0</u>
	· · · ·		— "	···				- · • 1		0.0	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	:	\$	(0.00	\$	i	0.0	00
10	Calc	culate monthly income. Add line 7 + line 9.	10.	Φ.		5,026.90	_		0.00) = \$	5,026.90
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	> _		3,020.30			0.00	<u></u>	3,020.30
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	r depe					•	n Schedu	ıle J. . +\$ _	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certaines									5,026.90
13.	Do y	ou expect an increase or decrease within the year after you file this form	1?							Comb	oined hly income
	П	Yes Explain:									

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Fill	in this informa	ation to identify yo	our case:			I		
	otor 1					Chr	eck if this is:	
Deb	ntor 1	Jeffrey A. Oc	ckeriuna				An amended filing	
	otor 2	Diane T. Ock	erlund					wing postpetition chapter the following date:
(Spo	ouse, if filing)						то ехрепоез аз от	
Unit	ed States Bankı	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J						
S	chedule	J: Your	Exper	ises				12/1
Be info	as complete ormation. If m	and accurate as	possible eded, atta	. If two married people and the control of the cont				
Par		ribe Your House	hold					
1.	Is this a joir ☐ No. Go to							
		es Debtor 2 live i	in a separ	ate household?				
	■ N							
			st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	btor 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	-	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents				Son		14	□ No ■ Yes
					Son		19	□ No ■ Yes
								□ No
							_	Yes
								□ No □ Yes
3.	expenses o	oenses include f people other t d your depende	han □	No Yes				Li Tes
Par	t 2: Estim	ate Your Ongoi	ng Monthi	y Expenses				
exp				uptcy filing date unless y y is filed. If this is a supp				apter 13 case to report of the form and fill in the
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> Y			Your exp	penses
		·		_				
4.		or home owners and any rent for the		ses for your residence. I or lot.	nclude first mortgag	e 4.	\$	1,554.11
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner's				4b.	·	0.00
		e maintenance, re eowner's associat		upkeep expenses dominium dues		4c. 4d.	·	25.00 0.00
5.				our residence, such as ho	me equity loans	5.	·	0.00

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6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$286.4 6d. Other. Specify: 6d. \$0.00 Food and housekeeping supplies 7. \$750.0 Childicare and children's education costs 8. \$25.0 Clothing, laundry, and dry cleaning 9. \$10.0 Medical and derhal expenses 10. \$350.0 Medical and dental expenses 11. \$350.0 Medical and dental expenses 11. \$350.0 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$150.0 Charitable contributions and religious donations 14. \$5.0 Charitable contributions and religious donations 15. Lefe insurance 156. Lefe line insurance 156. Lefe line insurance 156. Vehicle insurance 157. Specify: 157. Car payments for Vehicle 1 178. Car payments for Vehicle 1 179. Car payments for Vehicle 2 170. Coller. Specify: 170. Coller.	otor 1 otor 2	Jeffrey A. Ockerlund Diane T. Ockerlund	Case num	ber (if known)	
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	For exmodif	ou expect an increase or decrease in your expenses within the year after xample, do you expect to finish paying for your car loan within the year or do you expect y ication to the terms of your mortgage?	you file this	s form?	ease or decrease because

	nis information to identify yo	ur case:		
	•			
Debtor	Jeffrey A. Ocke	Priund Middle Name	Last Name	
Debtor 2				
(Spouse if		Middle Name	Last Name	
United S	States Bankruptcy Court for the	NORTHERN DISTRICT OF IL	LLINOIS	
Case nu	ımher			
(if known)				☐ Check if this is an
				amended filing
If two m You mus	arried people are filing toget	her, both are equally responsible u file bankruptcy schedules or a d in connection with a bankrupto	e for supplying correct information. mended schedules. Making a false st cy case can result in fines up to \$250	
	Sign Below			
Die		meone who is NOT an attorney to	o help you fill out bankruptcy forms?	•
Did		meone who is NOT an attorney to	o help you fill out bankruptcy forms?	,
Die ■	d you pay or agree to pay so	meone who is NOT an attorney to	Attach <i>B</i>	ankruptcy Petition Preparer's Notice,
•	d you pay or agree to pay so	meone who is NOT an attorney to	Attach <i>B</i>	
Und	d you pay or agree to pay so No Yes. Name of person der penalty of perjury, I declat they are true and correct.		Attach B Declarate and schedules filed with this declarate	ankruptcy Petition Preparer's Notice, ion, and Signature (Official Form 119)
Und	d you pay or agree to pay so No Yes. Name of person der penalty of perjury, I declar they are true and correct. /s/ Jeffrey A. Ockerlund		Attach B Declarat	ankruptcy Petition Preparer's Notice, ion, and Signature (Official Form 119)
Und	d you pay or agree to pay so No Yes. Name of person der penalty of perjury, I declat they are true and correct.		Attach B Declarate and schedules filed with this declarate X /s/ Diane T. Ockerlund	ankruptcy Petition Preparer's Notice, ion, and Signature (Official Form 119)

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Fill	in this infor	mation to identify you	case:							
Deb	tor 1	Jeffrey A. Ocker	lund							
		First Name		ddle Name		Last Name				
	tor 2 use if, filing)	Diane T. Ockerlu		ddle Name		Last Name				
` '	, 0,									
Unit	ed States Ba	inkruptcy Court for the:	NORTI	HERN DISTRICT	OF ILLIN	IOIS				
Cas (if kno	e number _								heck if this is an mended filing	
Sta	atement	orm 107 c of Financial								4/16
infor num	mation. If n	and accurate as possi nore space is needed, n). Answer every ques	attach a s stion.	separate sheet to	this for	m. On the top of ar				•
Pari	Give I	Details About Your Ma	rital Statu	is and Where You	u Lived	Before				
1.	What is you	r current marital statu	s?							
	■ Married □ Not ma									
2.	During the	ast 3 years, have you	lived any	where other than	where v	ou live now?				
	■ No □ Yes. Li	st all of the places you li	ved in the	last 3 years. Do n	ot includ	le where you live no	w.			
	Debtor 1 P	rior Address:		Dates Debtor 1 lived there		Debtor 2 Prior A	ddress:		Dates Debtor 2 lived there	2
		ast 8 years, did you ev ries include Arizona, Ca								operty
	■ No □ Yes M	ake sure you fill out <i>Scl</i>	nedule H· \	Your Codebtors (C	Official Fo	orm 106H)				
		and date you iiii dat doi	ioddio i i.	1041 004051010 (0	inolal i c					
Part	Expla	in the Sources of You	r Income							
	Fill in the tot	re any income from en al amount of income yo ng a joint case and you	u received	from all jobs and	all busin	esses, including par	t-time activities.	ous calen	ndar years?	
	□ No									
	_	Il in the details.								
			Debtor 1				Debtor 2			
			Sources	of income that apply.	(befo	ss income ore deductions and usions)	Sources of incon Check all that app		Gross income (before deductional exclusions)	ons
		of current year until	■ Wage bonuses,	s, commissions,	2,010	\$7,359.53	☐ Wages, commi bonuses, tips	ssions,	•	0.00
			`	iting a business			☐ Operating a bu	siness		
			- Opera	ung a busiliess						

Official Form 107

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Jeffrey A. Ockerlund Debtor 1 Diane T. Ockerlund Debtor 2 Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$88,637.40 \$0.00 □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$0.00 \$88,359.57 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2016) bonuses, tips bonuses, tips Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Total amount

paid

Dates of payment

Amount you

still owe

Creditor's Name and Address

Was this payment for ...

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	btor 1 btor 2	Jeffrey A. Ockerlund Diane T. Ockerlund	Document 1	Cas	e number (if known)		
7.	<i>Inside</i> of wh	n 1 year before you filed for bankruptoers include your relatives; any general particle you are an officer, director, person in incess you operate as a sole proprietor. 11 ny.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partners of their voting	erships of which you g securities; and an	u are a genera ly managing a	al partner; corporations agent, including one for
	_	No Yes. List all payments to an insider.					
		der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
3.	insid	n 1 year before you filed for bankruptoer? de payments on debts guaranteed or cosi			any property on ac	count of a d	ebt that benefited an
		No					
		Yes. List all payments to an insider der's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for	this payment
Dai	rt 4:	Identify Legal Actions Penossession	s and Foreclosures	paid	Still Owe	include cred	illoi s name
Pal		Identify Legal Actions, Repossession					
9.	List a	n 1 year before you filed for bankrupto Il such matters, including personal injury ications, and contract disputes.					
	_	No Yes. Fill in the details.					
		e title e number	Nature of the case	Court or agency		Status of th	ie case
10.		n 1 year before you filed for bankrupto k all that apply and fill in the details below		rty repossessed, f	oreclosed, garnis	hed, attached	d, seized, or levied?
		No. Go to line 11.					
		Yes. Fill in the information below.					
	Cred	litor Name and Address	Describe the Property		Date	Value of prope	
		F F0 11 0	Explain what happened		Date		Unknown
	635	Fower 52, LLC 5 Metrowest Blvd. Suite 180 ando, FL 32835	□ Property was repossessed.□ Property was foreclosed.			Return 12/28/2017	
			☐ Property was garnishe				
			☐ Property was attached	I, seized or levied.			
11.	accor	n 90 days before you filed for bankrup unts or refuse to make a payment beca No		uding a bank or fir	nancial institution	, set off any a	amounts from your
		Yes. Fill in the details.					
	Cred	litor Name and Address	Describe the action the	creditor took	Date a taken	action was	Amount
12.		n 1 year before you filed for bankrupto -appointed receiver, a custodian, or ar		rty in the possessi	ion of an assignee	e for the bene	efit of creditors, a
		No					
		Yes					

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	otor 1 otor 2	Jeffrey A. Ockerlund Diane T. Ockerlund		Document	C	ase number (if known)	
Par	t 5:	List Certain Gifts and Contribution	s					
3.	= 1	in 2 years before you filed for bankr No Yes. Fill in the details for each gift.	uptcy, d	did you give any gif	ts with a total valu	ue of more th	an \$600 per person?	•
	per p	s with a total value of more than \$60 person	0	Describe the gifts	5		Dates you gave the gifts	Value
		on to Whom You Gave the Gift and ress:						
14.		n 2 years before you filed for bankr			ts or contributions	s with a total	value of more than	\$600 to any charity?
		Yes. Fill in the details for each gift or c						
	more Char	s or contributions to charities that t e than \$600 rity's Name ress (Number, Street, City, State and ZIP Code		Describe what yo	ou contributed		Dates you contributed	Value
Par	t 6:	List Certain Losses						
15.		n 1 year before you filed for bankru	ptcy or	since you filed for	bankruptcy, did yo	ou lose anyth	ning because of thef	t, fire, other disaster
	or ga	mbling?						
		No						
		Yes. Fill in the details.						
		cribe the property you lost and	Descri	be any insurance o	overage for the lo	ss	Date of your	Value of property
	how	the loss occurred		e the amount that ins			loss	lost
Par	t 7:	List Certain Payments or Transfers						
	Withi	in 1 year before you filed for bankru ulted about seeking bankruptcy or p de any attorneys, bankruptcy petition p	ptcy, di preparii	ng a bankruptcy pe	tition?			ty to anyone you
	_	No		-,	0.01		,	
	_ `	Yes. Fill in the details.						
	Pers Addı	son Who Was Paid ress		Description and transferred	value of any prope	erty	Date payment or transfer was	Amount of payment
	Ema	il or website address on Who Made the Payment, if Not Y	ou				made	1
	543 McF	office of Scott A. Bentley 5 Bull Valley Road Suite 318 Henry, IL 60050 ttbentleylaw@gmail.com		Attorney Fees				\$1,600.00
7.		n 1 year before you filed for bankru ised to help you deal with your cred					r transfer any proper	ty to anyone who
	Do no	ot include any payment or transfer that	you list	ed on line 16.				
	_	No						
		Yes. Fill in the details.					D (
	Pers Add	on Who Was Paid ress		Description and transferred	value of any prope	erty	Date payment or transfer was made	Amount of payment

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Debtor 1 **Jeffrey A. Ockerlund**Debtor 2 **Diane T. Ockerlund**

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you	Description and v property transferr		payment	e any property or ts received or debts exchange	Date transfer was made
19.	Within 10 years before you filed for bankrupte beneficiary? (These are often called asset-protein No Yes. Fill in the details.		y property to a se	elf-settled t	rust or similar device o	of which you are a
	Name of trust	Description and v	alue of the prope	rty transfe	rred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Stor	age Units		
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.					
		Last 4 digits of account number	Type of accoun instrument	c m	eate account was losed, sold, noved, or ransferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables? No Yes. Fill in the details.	ear before you filed for	bankruptcy, any	safe depos	sit box or other deposi	tory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		escribe the	e contents	Do you still have it?
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		escribe the	e contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control fo	or Someone Else				
 Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in tr for someone. No Yes. Fill in the details. 					or, or hold in trust	
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe the	e property	Value
	art 10: Give Details About Environmental Information					
U	the purpose of Part 10, the following definition	ιο αμμιγ.				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

regulations controlling the cleanup of these substances, wastes, or material.

Debtor 1 **Jeffrey A. Ockerlund**Debtor 2 **Diane T. Ockerlund**

Case number (if known)

Rezardous material pollutand, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No		Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.						
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No								
No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time An officer, director, or managing executive of a corporation An owner of a limited liability company (LLC) or limited liability partnership (LLP) An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Name of accountant or bookkeeper Name of accountant or bookkeeper Name of accountant or bookkeeper Do not include Social Security number or ITIN. Dates business existed	Rep	ort all notices, releases, and proceedings that	at you know about, regardless of when	they occurred.				
Yes, Fill in the details. Name of site	24.	Has any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environment	ental law?			
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Yes. Fill in the details. Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State	25.	Have you notified any governmental unit of	any release of hazardous material?					
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Case Number Case Number Case Number Case Number Case Number Court or agency Name Address (Number, Street, City, Street, City, State and ZIP Code) Part 112 Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address Name of accountant or bookkeeper Employer Identification number Do not include Social Security number or ITIN. Dates business existed		_						
No			Address (Number, Street, City, State and		Date of notice			
Part 11: Give Details About Your Business or Connections to Any Business	26.	■ No						
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address Name of accountant or bookkeeper Describe the nature of the business Name of accountant or bookkeeper No Yes. Fill in the details below. Name Address Date Issued Date Issued			Name Address (Number, Street, City,	Nature of the case				
□ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address Describe the nature of the business Name Address (Number, Street, City, State and ZIP Code) Employer Identification number Do not include Social Security number or ITIN. Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. Name Address Name Address Date Issued	Par	11: Give Details About Your Business or 0	Connections to Any Business					
□ A member of a limited liability company (LLC) or limited liability partnership (LLP) □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ■ No Yes. Fill in the details below. Name Address Date Issued	27.	Within 4 years before you filed for bankrupto	cy, did you own a business or have an	y of the following connections to any	/ business?			
□ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Dates business? Include all financial institutions, creditors, or other parties. No □ Yes. Fill in the details below. Name Address Date Issued Date Issued Dates Dat								
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□ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. □ Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Describe the nature of the business Name of accountant or bookkeeper Do not include Social Security number or ITIN. Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. Name Address Date Issued		☐ An officer, director, or managing exe	ecutive of a corporation					
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institutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. Name Address			Name of accountant or bookkeeper	ŕ				
☐ Yes. Fill in the details below. Name Address Date Issued	28.		cy, did you give a financial statement t	o anyone about your business? Inclu	ude all financial			
Address		_						
		Address	Date Issued					

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers

Part 12: Sign Below

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Jeffrey A. Ockerlund Debtor 1 Debtor 2 Diane T. Ockerlund Case number (if known) are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jeffrey A. Ockerlund /s/ Diane T. Ockerlund Jeffrey A. Ockerlund Diane T. Ockerlund Signature of Debtor 1 Signature of Debtor 2 Date May 8, 2018 Date May 8, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this info	rmation to identify your case:		
Debtor 1	Jeffrey A. Ockerlund		
Debtor 2	First Name Middle Name Diane T. Ockerlund	Last Name	
(Spouse if, filing)	First Name Middle Name	Last Name	
United States B	ankruptcy Court for the: NORTHERN DI	STRICT OF ILLINOIS	
Case number			
(if known)			☐ Check if this is an amended filing
Official Fo	orm 108		
		ividuals Filing Under Chapter	r 7 12/15
		•	
	dividual filing under chapter 7, you must ve claims secured by your property, or	fill out this form it:	
_	ised personal property and the lease has	not expired.	
You must file th	nis form with the court within 30 days after lever is earlier, unless the court extends	er you file your bankruptcy petition or by the date set the time for cause. You must also send copies to the	
	people are filing together in a joint case, bund date the form.	both are equally responsible for supplying correct info	ormation. Both debtors must
Re as complete	and accurate as nossible If more snace	is needed, attach a separate sheet to this form. On th	e ton of any additional nages
	your name and case number (if known).	is needed, attach a separate sheet to this form. On th	e top of any additional pages,
Part 1: List	Your Creditors Who Have Secured Claims	\$	
			Official Form 106D) fill in the
information b	pelow.	D: Creditors Who Have Claims Secured by Property (
Identify the c	reditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	Citi Mortgage Inc.	☐ Surrender the property.	□No
name:		☐ Retain the property and redeem it.	_
Description of	of 4560 Barbarbor Drive Lake in	Retain the property and enter into a	Yes
property	the Hills, IL 60156 McHenry	Reaffirmation Agreement. Retain the property and [explain]:	
securing deb	t: County	— Retain the property and [explain].	
	Ditech	☐ Surrender the property.	□ No
name:		Retain the property and redeem it.	■ Yes
Description of 4560 Barbarbor Drive Lake in		Retain the property and enter into a Reaffirmation Agreement.	■ res
property	the Hills, IL 60156 McHenry	☐ Retain the property and [explain]:	
securing deb	t: County		
Creditor's	Huntington Bank	□ Surrander the property	□ No
name:	Huntington Bank	☐ Surrender the property. ☐ Retain the property and redeem it.	⊔ N0
		Retain the property and enter into a	■ Yes
Description o	of 2014 Dodge Caravan	Reaffirmation Agreement.	
property		☐ Retain the property and [explain]:	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Jeffrey A. Ockerlund Debtor 2 Diane T. Ockerlund	Case number (if known)
securing debt:	
	a Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill spired leases are leases that are still in effect; the lease period has not yet ended. e trustee does not assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my in property that is subject to an unexpired lease.	ntention about any property of my estate that secures a debt and any personal
X /s/ Jeffrey A. Ockerlund	χ /s/ Diane T. Ockerlund
Jeffrey A. Ockerlund Signature of Debtor 1	Diane T. Ockerlund
Signature of Debtor 1	Signature of Debtor 2

Date

Date

May 8, 2018

May 8, 2018

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-81022 Doc 1 Filed 05/08/18 Entered 05/08/18 13:19:19 Desc Main Document Page 47 of 50

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Jeffrey A. Ockerlund Diane T. Ockerlund		Case No.	
mic	Diane 1. Ockeriunu	Debtor(s)	Chapter	7
	DISCLOSUDE OF COMPL		NEV EOD DE	EDTAD(C)
	DISCLOSURE OF COMPE	ENSATION OF ATTOR	CNEY FOR DE	LBTOR(S)
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,600.00
	Prior to the filing of this statement I have received	l	\$	1,600.00
	Balance Due		\$	0.00
2. T	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. T	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4. I	I have not agreed to share the above-disclosed com	pensation with any other person	unless they are mem	bers and associates of my law firm
[☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the n			
5. I	In return for the above-disclosed fee, I have agreed to	render legal service for all aspect	s of the bankruptcy c	ase, including:
b c	 Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, states Representation of the debtor at the meeting of credit [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on h 	atement of affairs and plan which tors and confirmation hearing, an reduce to market value; exe- tions as needed; preparation	may be required; id any adjourned hea	rings thereof;
6. B	By agreement with the debtor(s), the above-disclosed f Representation of the debtors in any d any other adversary proceeding.	ee does not include the following		es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of a ankruptcy proceeding.	ny agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
Ma	ay 8, 2018	/s/ Scott A. Bentle	ey	
Do	ate	Scott A. Bentley Signature of Attorne		
		Law Office of Sco		
		5435 Bull Valley F McHenry, IL 6005		
		815-385-0669 Fa		
		scottbentleylaw@	gmail.com	
		Name of law firm		

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United States Bankruptcy Court Northern District of Illinois

In re	Diane T. Ockerlund		Case No.	
		Debtor(s)	Chapter	7
	VE	CRIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	21
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	tors is true and	correct to the best of my
Date:	May 8, 2018	/s/ Jeffrey A. Ockerlund Jeffrey A. Ockerlund		
		Signature of Debtor		
Date:	May 8, 2018	/s/ Diane T. Ockerlund		
		Diane T. Ockerlund		
		Signature of Debtor		

American Express Box 0001 Los Angeles, CA 90096-8000

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Capital One P.O. Box 6492 Carol Stream, IL 60197

Centegra Health System P.O. Box 6204 Carol Stream, IL 60197-6204

Centegra Health System P.O. Box 6204 Carol Stream, IL 60197-6204

Central Credit Services P.O. Box 357 Ramsey, NJ 07446

Citi Mortgage Inc. P.O. Box 790005 Saint Louis, MO 63179-0005

Comenity -Lenovo Preferred Card P.O. Box 659707 San Antonio, TX 78265-9707

Ditech P.O. Box 6172 Rapid City, SD 57709-6172 Huntington Bank P.O. Box 182519 Columbus, OH 43218

Mayo Clinic Rochester 200 First Street SW Rochester, MN 55905-0001

Metro Center for Health 901 McClintok Drive Ste 202 Burr Ridge, IL 60527

Northwest Neurology Ltd. P.O. Box 71831 Chicago, IL 60694-1831

NW Oral & Maxilofacial Surgery 2445 Westfield Drive St. 502 Elgin, IL 60124

Optimum Outcomes P.O. BOx 660943 Dallas, TX 75266

Professional Service Bureau 911 Lund Blvd. Suite 100 Anoka, MN 55303-0548

Synchrony Bank-Discount Tires P.O. Box 960061 Orlando, FL 32896-0061

Synchrony Bank-JCP P.O. Box 960090 Orlando, FL 32896-0090

Synchrony Bank-JCP P.O. Box 960090 Orlando, FL 32896-0090